



The Great Pumpkin 5K Run/Walk

**Saturday, October 21,
2017**

This will be a Halloween 5K and Kids Run that will take participants on a spooky journey though Cascade Park where creatures (human and otherwise) will be lurking in the shadows. Those who survive the journey will be

rewarded with a post race party. Costumes are encouraged but not required for run/walk participants. All proceeds will benefit a local family dealing with cancer.

Location: Cascade Park / 1928 East Washington St / New Castle, PA 16101

Race Director: Dan Reed (724-652-5105) or DReed055@aol.com

Race Time: Pre-registration 4:30–5:45 PM
Kids Run (0 to 10 yrs) at 5:45 PM / 5K Run at 6:00 PM

Awards: Top 3 overall male and female finishers
Top 3 male/female in each age group: 11 and under, 12-15, 16-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, over 70.

Incentives: T-shirt for each pre-registered 5K runner/walker (adult sizes only), ticket for the Chinese auction and post-race refreshments

Entry Fee: 5K: \$17.00 pre-registration by 10/7/17 (\$20.00 day of the race)
Kids Run: \$5.00 (No shirt)
Send to: Great Pumpkin 5K / 330 Fairground Rd / New Castle, PA16101

Checks to be made out to *The Great Pumpkin 5K* / or register at *RunSignUp.com*

Name _____ Age (Race Day) _____ Birth Date ___/___/___

Address _____

Phone Number _____ Male/Female _____ T-Shirt Size: **S / M / L / XL** (circle one)

Kids Run (Approx 0.25 Mile) ___ / 1.5 Mile Walk ___ / 5K Walk/Run ___

Release: By signing this application, I hereby waive, discharge, and release myself from any and all claims, damages, demands and courses of action of any kind, including negligence that I may have against the volunteers, sponsors, and organizers of this event, which may arise from my participation in this event. I hereby certify that I am physically fit to participate.

Signature _____ Date ___/___/___

Signature of guardian (under 18) _____ Date ___/___/___